

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

CHEMICAL PROCESS AND COMPOSITION

the specification of which:

☒ is attached hereto, and/or

☐ was filed on _____ as Application Ser. No. _____

☐ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Sec. 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Sec. 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

<u>00850109.0</u>	<u>European Patent Application filed for SE et al.</u>	<u>2000-06-19</u>
(Number)	(Country)	(Year/Month/Day)

I hereby claim the benefit under Title 35, United States Code § 119 of any provisional application(s) listed below.

<u>60/212,633</u>	<u>US</u>	<u>2000-06-19</u>
(Number)	(Country)	(Year/Month/Day)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following as my attorneys of record, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent Office:

David Serbin Reg. No. 30.589

Direct all correspondence to:

**Law Offices of David J. Serbin
1423 Powhatan Street
Unit 2 - First floor
ALEXANDRIA VA 22314**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Sec. 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: NYSTRÖM, Mats

Inventor's signature _____

Date _____

April 3rd, 2001

Residence: Ytterby

Citizenship: Swedish citizen

Post Office Address: Dannemarksgatan 31, SE-442 52 Ytterby, Sweden

Full name of second joint inventor, if any: JÄRNVIK, Christina

Inventor's signature _____

Date _____

2001-04-04

Residence: Nol

Citizenship: Swedish citizen

Post Office Address: Södergården 1, SE-449 41 Nol, Sweden

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